SENATE BILL REPORT 2SHB 1373

As of March 24, 2009

Title: An act relating to equitable access to appropriate and effective children's mental health services.

Brief Description: Concerning children's mental health services.

Sponsors: House Committee on Health & Human Services Appropriations (originally sponsored by Representatives Dickerson, Kagi, Green, Cody, Darneille, Dunshee, Roberts, Goodman, Appleton, Kenney, Orwall, Hurst, Moeller, Takko, Chase, Rolfes, Carlyle, Simpson, Nelson, Conway and Ormsby).

Brief History: Passed House: 3/09/09, 66-29.

Committee Activity: Human Services & Corrections: 3/24/09.

SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

Staff: Kevin Black (786-7747)

Background: The state delivers mental health services to children through Regional Support Networks (RSNs), through managed care programs such as Healthy Options, and through private providers on a fee-for-service basis. The state establishes standards defining the nature of the services which may be provided to qualifying children, and places caps on the number of hours of outpatient therapy which a child may claim under these state programs.

Second Substitute House Bill 1088, enacted in 2007, increased the number of outpatient therapy visits which could be claimed by a qualifying child per calendar year from 12 to 20, and provided that therapy could be provided by any licensed mental health professional. These increased benefits are scheduled to expire on July 1, 2010.

Second Substitute House Bill 1088 also created the Children's Mental Health Evidence Based Practice Institute (EBP Institute) at the University of Washington. One of the functions of the EBP Institute is to collaborate with the Department of Social and Health Services (DSHS) to develop and implement policies to improve prescribing practices for treatment of emotional or behavioral disturbances in children.

Summary of Bill: The expiration date for the expanded outpatient therapy benefit for children of July 1, 2010, is removed. Therapy may also be provided by persons under the

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direct supervision of licensed mental health professionals. Therapy must be made available when a need is identified through a developmental screening, consistent with federal standards.

DSHS and the EBP Institute must collaborate to encourage and develop incentives for the use of recommended prescribing practices for treatment of emotional or behavioral disturbances in children.

Appropriation: None.

Fiscal Note: Requested on March 17, 2009.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: This state has taken great steps over the past several years to improve the delivery of mental health services to children. The goal is to increase coping skills for children and families through the use of evidence-based practices. Measures already adopted have increased the numbers of children receiving services and reduced reliance on psychotropic medication. The changes in this bill will expand upon this work. It will be helpful to be able to have services delivered by a person under the supervision of a therapist.

Persons Testifying: PRO: Representative Dickerson, prime sponsor; Eric Trupin, University of Washington; Pete Peterson, Washington Association of Juvenile Court Administrators; Laurie Lippold, Children's Home Society.

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